

DD/S

72-0927

NOTED N.Y. 3/9/72

FILE

Medical

THE PRESIDENT'S COMMITTEE ON HEALTH EDUCATION

R. HEATH LARRY
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Mrs. Ella L. Strother

Mrs. Peggy Wright Wood

Richard P. McGrail
Hon. Elliot L. Richardson
Ex officio

VICTOR WEINGARTEN
Director

Please Reply To:

801 SECOND AVENUE
NEW YORK, N.Y. 10017
212/889-6760

March 6, 1972

John W. Coffey
Deputy Director for Support
Central Intelligence Agency
Washington, D.C. 20505

Dear Mr. Coffey:

On behalf of the President's Committee, I would like to thank you for the paper you have submitted which outlines the health education of employees of your agency.

It was generous of you to take the time to prepare this material, and we appreciate the effort you made.

Sincerely,

Victor Weingarten

Victor Weingarten
Director

THE PRESIDENT'S COMMISSION ON ASSASSINATIONS
801 SECOND AVENUE
NEW YORK, NEW YORK 10017



John W. Coffey
Deputy Director for Support
Central Intelligence Agency
Washington, D.C. 20505

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C. 20505

DD / S REGISTRY

FILE

Medical

Mr. R. Heath Larry
Chairman
The President's Committee on
Health Education
801 Second Avenue
New York, New York, 10017

Dear Mr. Larry:

We have been requested by Mr. Cole of The White House staff to provide you with certain information you have requested as to what is being done with respect to the health education of employees of this Agency.

The essential legislative authorities for our medical program, of which health education is a part, are the Act of August 8, 1946 (PL 79-658) and the Central Intelligence Agency Act of 1949 (PL 81-110). In implementation of the former act, Bureau of the Budget Circular No. A-72, Subject: Federal Employees Occupational Health Service Programs, dated 18 June 1965, established criteria to be followed by Federal agencies in providing health services programs. Employee health education is specifically provided for in this circular. More recently, the Williams-Steiger Occupational Safety and Health Act of 1970 (PL 91-596) and the ensuing Executive Order 11612 dealt more specifically with employee education and training in the field of occupational safety and health for Federal employees.

A summary statement of what is currently being done with respect to the health education of employees of this Agency would be as follows:

a. New employees, as part of their entrance-on-duty processing, are briefed in groups by professional personnel from our Office of Medical Services. This briefing covers various aspects of personal health, health services available from the Agency, and health services available in the Washington area.

b. Health aspects are also covered in other formal training courses such as those preparing employees for overseas assignment.

c. Training in first aid and emergency procedures is provided certain non-medical employees who require such training in their Agency assignments.

d. The Office of Medical Services has since 1969 offered a Consultative Services program where employees may receive professional health counseling on personal or family problems as well as on job-related problems.

e. Since 1970 the Office of Medical Services has directed a special effort to the health education of employees on the hazards of drug abuse. This has taken the form of poster displays and other exhibits. More recently, seminars on this subject are being conducted for small groups.

f. Health education is a continuing major element in our occupational safety and health program. Examples of this would be health advice to employees operating potentially hazardous machinery, employees working in high noise areas, and employees using certain optical machines for prolonged periods.

g. The continuing education of Agency medical officers, nurses and other health service personnel is assured by means of seminars, refresher courses, and external training where appropriate.

Planned activities in the health education area include:

a. Incorporation into our routine medical processing procedures of the use of films, slides and other audiovisual equipment by health service personnel in a team effort to assist medical officers to increase the awareness of Agency employees about health problems and hazards.

b. Special measures in the field of Alcoholism as prescribed for Federal agencies by the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970 (PL 91-616).

c. Presentation of special programs on selected health hazards to larger groups of employees assembled in the Agency auditorium.

The Agency medical program is directed by John R. Tietjen, M.D., Director of Medical Services. Dr. Tietjen is available for consultation with you or your staff in the event further information is desired concerning our health education activities.

Sincerely,

/s/ John W. Coffey
Deputy Director
for Support

STAT OMS/Exo/ [] (3Mar72)

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1 - ER (Attn: [])


1 - Director of Security

RSW

JWC

Recommend
your signature.

This should be
mailed today,

3 March -


Ellen

Done is
10 Mar 72

Please send
Copy to Dir.
Sietzen - ghr
1

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM

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1-67

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COMMITTEE MEMBERS

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Joseph A. Beirne	President Communications Workers of America, AFL-CIO Washington, D. C.
Leroy Burney, M.D.	President Milbank Memorial Fund New York, N. Y.
Joy G. Cauffman, Ph.D.	School of Medicine University of Southern California Los Angeles, Calif.
M. Alfred Haynes, M.D.	Charles R. Drew Post Graduate Medical School Los Angeles, Calif.
J. Alexander McMahon	President Blue Cross-Blue Shield of North Carolina Durham, N. C.
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Joseph T. Painter, M.D.	Ledbetter Clinic Houston, Texas
C. Wrede Petersmeyer	Chairman and President Corinthian Broadcasting Corporation New York, N. Y.
Dan Seymour	President J. Walter Thompson Company New York, N. Y.
Irving Shapiro, Ph.D.	Health Insurance Plan of Greater New York New York, N. Y.
Charles Siegfried	Vice Chairman of the Board Metropolitan Life Insurance Co. New York, N. Y.
Scott Simonds, Dr. P.H.	School of Public Health University of Michigan Ann Arbor, Mich.
J. Henry Smith	President Equitable Life Assurance Society New York, N. Y.
Mrs. Ella L. Strother	President Provident Comprehensive Neighborhood Health Council Baltimore, Md.
Mrs. Peggy Wright Wood	Director, Public Health Social Work Onondaga Co. Dept. of Health Syracuse, N. Y.
Ex officio Members:	
Richard McGrail	President National Health Council
Hon. Elliot L. Richardson	Secretary U.S. Dept. of Health, Education and Welfare

Boston	Thursday, January 6, 1972
Pittsburgh	Monday, January 10, 1972
St. Louis	Wednesday, January 12, 1972
Denver	Monday, January 17, 1972
San Francisco	Wednesday, January 19, 1972
Los Angeles	Thursday, January 20, 1972
Atlanta	Thursday, January 27, 1972
Houston	Wednesday, February 2, 1972

Please address inquiries to:
Victor Weingarten, Director
The President's Committee
on Health Education
801 Second Avenue
New York, N. Y. 10017
212/889-6760

THE PRESIDENT'S COMMITTEE ON HEALTH EDUCATION



The President's Committee on Health Education was created by President Nixon on September 14, 1971, to recommend ways to develop in the general public a sense of "health consumer citizenship." This involves helping every American to learn how best to achieve and maintain a reasonable level of health.

To do this job, the Committee and its Staff Council have embarked upon a four-phase program:

1. Fact Finding. The Committee will examine the institutions, agencies and programs currently involved in consumer health education. Although expenditures in this field are thought to be at least \$1 billion annually, and may be as much as \$3 billion, many authorities question the effectiveness of some of these activities, and are in agreement that a thorough assessment of the present state of affairs is necessary before changes can be recommended and implemented.

Eight regional hearings are planned to afford representatives of the public and consumer groups, as well as area health officials and educators, an opportunity to discuss with the Committee their activities and programs, and to describe their needs and plans for future development.

This testimony will be supplemented by other data gathered directly from those providing major resources and services in the field of consumer health education.

2. Analysis and Evaluation. A major portion of the Committee's activity will

be devoted to analyzing the data gathered, with particular emphasis on the motivational aspects of this problem. It will seek to identify the factors that influence individuals to do or not do things that are considered to be good or bad for their well being.

3. Recommendations. Following this analysis, the Committee has been asked by the President to recommend new national approaches and programs. These may include the establishment of a National Health Education Foundation.

4. Implementation. The Committee's final task will be to devise a strategy to help implement its recommendations.

Whether its recommendations involve public or private responsibilities or a combination of both, and what kind of structure, if any, should be devised, remain open ended questions until the initial fact-finding and evaluation phases of the Committee's work are completed.

The Committee's work is funded through grants to the National Health Council, which is acting as its fiscal agent. As part of its cooperative relationship, the Council is devoting its National Health Forum in New Orleans, March 21-22, 1972, to a "preview" of the Committee's tentative findings and recommendations. Participants at that meeting, whose theme is "People Keeping Healthy—Goals and Approaches to Consumer Health Education," will have an opportunity to react to the Committee's preliminary findings.

While the Committee recognizes the difficulty in fixing precise boundaries for consumer health education, it is adopting a broad view of its Charge, and is specifically concerned with such major types of health education programs as may be involved in:

- A. Specific action (vaccination, immunization, chest X-rays, etc.)
- B. Habit or attitude changing (cigarette smoking, diet, regular exercise, drugs, use of seat belts, etc.)
- C. Support for community action (pollution, fluoridation, noise prevention, etc.)
- D. Education which leads people to know when to consult their doctors, especially at the early stage of serious disease.
- E. Participation in community health planning and development of health facilities and services.

The Committee is also interested in exploring impediments to good health—not only those that are due to ignorance and inertia, but also those which result from the promotion and sale of products which are inimical to health.

In performing its assigned task, the Committee welcomes the active participation of all individuals, organizations and institutions concerned with developing a broad and realistic concept of "health consumer citizenship."

72-1204

THE WHITE HOUSE

WASHINGTON

DD/S 72-0808

February 25, 1972

MEMORANDUM FOR THE HEADS OF
EXECUTIVE DEPARTMENTS AND AGENCIES

The attached memorandum from R. Heath Larry, Chairman of the President's Committee on Health Education, is self-explanatory.

I would appreciate it if you would have a member of your staff provide the information that Mr. Larry has requested. It would be very helpful in their deliberations if the Committee could have this information by Monday, March 6, 1972. I would suggest that you give every consideration to Mr. Larry's suggestion of designating someone in your office as a contact point for the President's Committee on Health Education.

Thank you very much.



Kenneth R. Cole, Jr.
Deputy Assistant to the President
for Domestic Affairs

Attachment

THE PRESIDENT'S COMMITTEE ON HEALTH EDUCATION

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WALTER J. MCNERNEY
Vice Chairman

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M. Alfred Haynes, M.D.
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J. Henry Smith
Mrs. Ella L. Strother
Mrs. Peggy Wright Wood

Richard P. McGrail
Hon. Elliot L. Richardson
Ex officio

VICTOR WEINGARTEN
Director

February 15, 1972

Please Reply To:
801 SECOND AVENUE
NEW YORK, N.Y. 10017
212/889-5760

MEMORANDUM FOR: Secretaries of Executive Departments and
Heads of Major Independent Agencies

FROM: President's Committee on Health Education

In carrying forward the charge laid upon this Committee by the President to recommend ways and means of developing a national sense of "health consumer citizenship," the President's Committee on Health Education needs information and counsel of the Executive Departments and Agencies.

The approach of our Committee is briefly outlined in the leaflet attached. We are aware, of course, that many Departments and Major Independent Agencies of the Federal government are involved in various aspects of consumer health education as it relates to individual and family information and behavior, to selection and use of health resources, and to consumer and community participation in health planning and the development and management of health facilities and services. Consequently, any experience you might share with the Committee will be helpful, especially as it touches on current programs and legislative authorities.

The Committee recognizes, however, that the scope and complexity of Federal activities are difficult to summarize. To avoid an undue burden on Departments and Agencies, the

-2-

Committee has identified a number of officials knowledgeable of Federal roles and programs in consumer health education with whom it will meet informally. By this method lengthy prepared reports from Departments will not be necessary and the Committee will nonetheless gain a Federal perspective of health education.

In addition, and specifically, the Committee would appreciate receiving a reasonably comprehensive -- but reasonably brief -- outline of what is being done with respect to the health education of Federal employees under your jurisdiction. In describing current and planned activities and results, it would be helpful if you could identify pertinent legislative authorities, budgetary provisions, organization, and staffing patterns. We feel that information from the Executive Branch along these lines will be especially important in light of the predominate place in the nation's economy of the Federal government as an employer. You will appreciate that our Committee is working within a very tight time span which requires that we ask for early responses by shortly after the first of March, if at all possible. If you feel it might facilitate follow-through, we would be happy to have you designate a representative with whom our staff can relate in the event further contact or clarification might be desirable.

Let me assure you that our Committee will be greatly indebted to you for your assistance in its work.

Sincerely,

R. Heath Larry
R. Heath Larry
Chairman

DD / S R E G I S T R Y
F I L E Medical

Director of Medical Services
1D-4067 Hqs.

John:

Note the very tight suspense date on this request.
Our letter should be forwarded on 3 March.

Please draft a suitable response for DD/S signature. Perhaps it should identify you as the point of contact in case the committee wishes to follow up.

3/1/72
Robert S. Wattles

ADD/S 7D-24 Hqs. ☐

STAT

EO-DD/S:LDP:es (1 Mar 72)

Distribution:

Orig - Adse w/orig of att (DD/S 72-0808)

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1 - DD/S chrono

DD/S 72-0808: Memo dtd 25 Feb 72 to Heads of Exec. Depts. & Agencies fm Kenneth R.

Cole, Jr., Dep. Assistant to the President for Domestic Affairs, subj: President's
Committee on Health Education

STAT

Executive Order

72-1204

THE WHITE HOUSE
WASHINGTON

DD/S 72 0808

February 25, 1972

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Deputy Assistant to the President
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Let me assure you that our Committee will be greatly indebted to you for your assistance in its work.

Sincerely,

Heath Larry
Heath Larry
Chairman

TRANSMITTAL SLIP		DATE 1 March 1972
TO: Mr. Wattles		
ROOM NO.	BUILDING	
REMARKS:		
<p>Recommend your signature.</p> <p style="text-align: right;"><i>[Signature]</i> LDP</p> <p><i>Hand CARRY FOR SPEED</i></p>		
FROM:		
ROOM NO.	BUILDING	EXTENSION

FORM NO. 241
1 FEB 55

REPLACES FORM 36-8
WHICH MAY BE USED.

(47)